

Abstract

A method for splinting rib injuries is disclosed. A pair of anchor strips having a plurality of fasteners on their exposed surfaces are attached to the skin of the chest cavity by an adhesive, the strips being more or less vertically oriented and equidistantly spaced from the injury. Elastomeric straps having a plurality of fastener receivers are removably fastened to the anchor strips across the injury so as to produce a stabilizing/reducing force at the injury. Tension in the straps and orientation of the straps are adjusted to maximize patient comfort. In another embodiment a pad is placed between the elastomeric straps and the chest wall. In other embodiments the pad is a hot or cold compress. In yet another embodiment the pad is connected to a cold therapy machine.